

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Facility Information

Facility Name: DRAKE HOUSE I (THE) (611009)

Address: 800 SOUTH DRAKE AVENUE, MARSHFIELD, WI 54449

License Status: REGULAR

Licensed/Certified/Registered 06/30/1997

Regional Office: NORTHERN REGION (RHINELANDER), (715) 365-2800

Survey History

Survey ID: 0097127 **End Date:** 05/24/2006 **Type:** STANDARD **Purpose:** SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10009562 Served 06/08/2006

Deficiencies Cited

50.065(2)(d)

83.33(2)(g)2

83.33(3)(a)1

Subject Area

MAINTAIN BACKGROUND INFORMATION

ANNUAL FOLLOW-UP EXAMINATION

PRACTITIONER'S WRITTEN ORDER FOR MEDS

Compliance
Verified

Corrected

Survey ID: 0095928 **End Date:** 10/12/2005 **Type:** OTHER **Purpose:** COMPLAINT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10009482 Served 11/23/2005

Deficiencies Cited

83.32(2)(a)

83.45(1)

Subject Area

INDIVIDUALIZED SERVICE PLAN-SCOPE

ACCESSIBILITY

Compliance
Verified

05/16/2006

05/16/2006

Corrected

Yes

Yes

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Survey ID: 0093169 **End Date:** 07/29/2004 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10009315 Served 08/19/2004

| <u>Deficiencies Cited</u> | <u>Subject Area</u> | <u>Compliance Verified</u> | <u>Corrected</u> |
|---------------------------|---------------------------------------|--------------------------------|------------------|
| 83.14(1)(d) | FIRE SAFETY, FIRST AID & CHOKING | 05/16/2006 | Yes |
| 83.33(3)(a)1 | PRACTITIONER'S WRITTEN ORDER FOR MEDS | 05/16/2006 | No |

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Enforcement History

Date: 08/17/2004 **SOD #10009315** **Appealed: No**

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION

FORFEITURE---83.14(1)(d)

FORFEITURE---83.33(3)(a)1

Date: 07/28/2003 **SOD #10005194** **Appealed: Yes** **Decision: WITHDRAWN APPEAL (NO STIPULATIO**

Sanctions

OTHER SANCTION

FORFEITURE---83.33(2)(c)

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Complaint History

Date Complaint Received: 09/07/2005

Date Investigation Completed: 10/12/2005

| <u>Subject Area(s)</u> | <u>Result</u> | <u>SOD #</u> |
|-------------------------------------|-------------------|--------------|
| RESIDENT RIGHTS | NOT SUBSTANTIATED | |
| RESIDENT BEHAVIOR/FACILITY PRACTICE | SUBSTANTIATED | NOT RECORDED |
| NUTRITION & FOOD SERVICES | NOT SUBSTANTIATED | |
| STAFF TRAINING AND PROFICIENCY | NOT SUBSTANTIATED | |
| PROGRAM SERVICES | SUBSTANTIATED | NOT RECORDED |
| QUALITY OF LIFE | NOT SUBSTANTIATED | |

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.